



UNITED STATES PATENT AND TRADEMARK OFFICE

COMMISSIONER FOR PATENTS  
UNITED STATES PATENT AND TRADEMARK OFFICE  
WASHINGTON, D.C. 20231  
[www.uspto.gov](http://www.uspto.gov)

APPLICATION NUMBER	FILING/RECEIPT DATE	FIRST NAMED APPLICANT	ATTORNEY DOCKET NUMBER
10/062,114	01/31/2002	Peter Osycka	SMB-PT041 (P 02 048 M US)

3624  
VOLPE AND KOENIG, P.C.  
SUITE 400, ONE PENN CENTER  
1617 JOHN F. KENNEDY BOULEVARD  
PHILADELPHIA, PA 19103

**RECEIVED**  
AM/PM

APR 15 2002

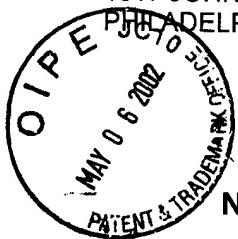
**FORMALITIES LETTER**



\*OC000000007844061\*

**VOLPE & KOENIG, P.C.**

Date Mailed: 04/11/2002



**NOTICE TO FILE MISSING PARTS OF NONPROVISIONAL APPLICATION**

**FILED UNDER 37 CFR 1.53(b)**

***Filing Date Granted***

An application number and filing date have been accorded to this application. The item(s) indicated below, however, are missing. Applicant is given **TWO MONTHS** from the date of this Notice within which to file all required items and pay any fees required below to avoid abandonment. Extensions of time may be obtained by filing a petition accompanied by the extension fee under the provisions of 37 CFR 1.136(a).

- The oath or declaration is unsigned.
- To avoid abandonment, a late filing fee or oath or declaration surcharge as set forth in 37 CFR 1.16(l) of \$65 for a small entity in compliance with 37 CFR 1.27, must be submitted with the missing items identified in this letter.
- The application was filed in a language other than English. Applicant is required to provide an English translation of the specification and a statement that the translation is accurate. (See 37 CFR 1.52(d)).
- Applicant must file an English translation of the application, the \$ 130 fee set forth in 37 CFR 1.17(i), unless previously submitted, and a statement that the translation is accurate (37 CFR 1.52(d)).
- **The balance due by applicant is \$ 195.**
- Because your specification was filed in a language other than English, the Office was unable to determine the number of claims submitted. Additional claim fees may be due once the number of claims can be determined.

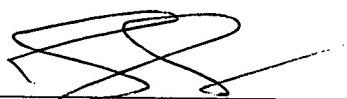
PP

65.00  
130.00

00000011 10062114  
05/07/2002 HMARZ11

01 FC:205  
02 FC:139

*A copy of this notice **MUST** be returned with the reply.*



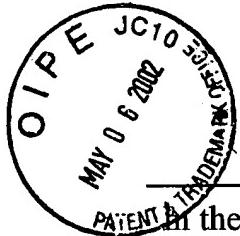
Customer Service Center

Initial Patent Examination Division (703) 308-1202

PART 2 - COPY TO BE RETURNED WITH RESPONSE

**PATENT**

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE



**in the PATENT APPLICATION of:**

Peter Osypka

**Application No.:** 10/062,114

**Our File:** SMB-PT041

**Confirmation No.:** 9980

(P 02 048 M US)

**Filed:** January 31, 2002

**Date:** May 2, 2002

**For:** IMPLANTABLE STENT

**Group:** Not Yet Known

**Examiner:** Not Yet Known

**COMMUNICATION IN RESPONSE TO  
NOTICE TO FILE MISSING PARTS OF NONPROVISIONAL APPLICATION**

Box Missing Parts  
Commissioner for Patents  
Washington, D.C. 20231

Sir:

In response to the Notice to File Missing Parts of Nonprovisional Application mailed from the Office on April 11, 2002, the following are enclosed:

1. Copy of Notice to File Missing Parts of Nonprovisional Application;
2. Executed Declaration;
3. English Translation of the application; and

**Applicant: Peter Osypka**  
**Application No.: 10/062,114**

4. A check in the amount of \$195 as payment of the surcharge for a small entity.

Respectfully submitted,

Peter Osypka

By   
Randolph J. Huis  
Registration No. 34,626  
(215) 568-6400

Volpe and Koenig, P.C.  
Suite 400, One Penn Center  
1617 John F. Kennedy Boulevard  
Philadelphia, PA 19103

RJH/srs  
Enclosures (4)

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.



# FEE TRANSMITTAL for FY 2002

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$)

195

**Complete if Known**

Application Number	10/062,114
Filing Date	January 31, 2002
First Named Inventor	Peter Osypka
Examiner Name	Not Yet Known
Group Art Unit	Not Yet Known
Attorney Docket No.	SMB-PT041 (P 02 048 M US)

**METHOD OF PAYMENT**

1.  The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number **22-0493**Deposit Account Name **VOLPE AND KOENIG, P.C.** Charge any Deficiencies or Credit any Overpayment in the Total Fees Associated With This Communication Applicant claims small entity status. See 37 CFR 1.27

2.  Payment Enclosed:

 Check  Credit card  Money Order  Other**FEE CALCULATION (continued)****3. ADDITIONAL FEES**

Fee Code	Large Entity Fee (\$)	Small Entity Fee (\$)	Fee Description	Fee Paid
105	130	205	65 Surcharge - late filing fee or oath	65
127	50	227	25 Surcharge - late provisional filing fee or cover sheet	
139	130	139	130 Non-English specification	130
147	2,520	147	2,520 For filing a request for ex parte reexamination	
112	920*	112	920* Requesting publication of SIR prior to Examiner action	
113	1,840*	113	1,840* Requesting publication of SIR after Examiner action	
115	110	215	55 Extension for reply within first month	
116	400	216	200 Extension for reply within second month	
117	920	217	460 Extension for reply within third month	
118	1,440	218	720 Extension for reply within fourth month	
128	1,960	228	980 Extension for reply within fifth month	
119	320	219	160 Notice of Appeal	
120	320	220	160 Filing a brief in support of an appeal	
121	280	221	140 Request for oral hearing	
138	1,510	138	1,510 Petition to institute a public use proceeding	
140	110	240	55 Petition to revive - unavoidable	
141	1,280	241	640 Petition to revive - unintentional	
142	1,280	242	640 Utility issue fee (or reissue)	
143	460	243	230 Design issue fee	
144	620	244	310 Plant issue fee	
122	130	122	130 Petitions to the Commissioner	
123	50	123	50 Processing fee under 37 CFR 1.17(q)	
126	180	126	180 Submission of Information Disclosure Stmt	
581	40	581	40 Recording each patent assignment per property (times number of properties)	
146	740	246	370 Filing a submission after final rejection (37 CFR § 1.129(a))	
149	740	249	370 For each additional invention to be examined (37 CFR § 1.129(b))	
179	740	279	370 Request for Continued Examination (RCE)	
169	900	169	900 Request for expedited examination of a design application	
Other fee (specify) _____				

SUBTOTAL (1) (\$)

0

**2. EXTRA CLAIM FEES**

Total Claims	Independent Claims	Extra Claims	Fee from below	Fee Paid
		** =	X =	
		** =	X =	

## Large Entity Small Entity

Fee Code (\$)	Large Entity Fee (\$)	Small Entity Fee (\$)	Fee Description
103	18	203	9 Claims in excess of 20
102	84	202	42 Independent claims in excess of 3
104	280	204	140 Multiple dependent claim, if not paid
109	84	209	42 ** Reissue independent claims over original patent
110	18	210	9 ** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$)

0

\*\*or number previously paid, if greater. For Reissues, see above

\*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$)

195

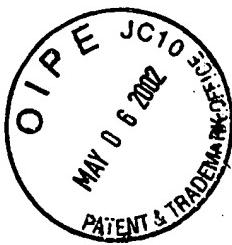
**SUBMITTED BY**

Complete (if applicable)

Name (Print/Type)	Randolph J. Huis	Registration No. (Attorney/Agent)	34,626	Telephone	215-568-6400
Signature	_____ Randolph J. Huis			Date	5.2.2002

**WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.**

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.



HH

MP/KS

Please type a plus sign (+) inside this box → 

PTO/SB/21 (08-00)

Approved for use through 10/31/2002. OMB 0651-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

## TRANSMITTAL FORM

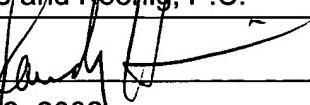
(to be used for all correspondence after initial filing)

		Application Number	10/062,114
		Filing Date	January 31, 2002
		First Named Inventor	Peter Osypka
		Group Art Unit	Not Yet Known
		Examiner Name	Not Yet Known
Total Number of Pages in This Submission		Attorney Docket Number	SMB-PT041

### ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input checked="" type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment / Reply	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):  English Translation of the Application; Preliminary Amendment; Substitute Specification; and a check in the amount of \$195.
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	
<input checked="" type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
<input checked="" type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input checked="" type="checkbox"/> Response to Missing Parts/ Incomplete Application		
<input checked="" type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		
Remarks		

### SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Randolph J. Huis Volpe and Koenig, P.C.	Reg. No. 34,626
Signature		
Date	May 2, 2002	

### CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Washington, DC 20231 on this date:

May 2, 2002

Typed or printed name	Randolph J. Huis	Date	May 2, 2002
Signature			

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.